

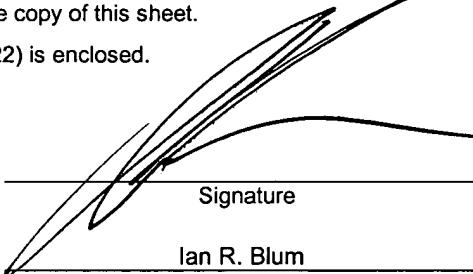
Ivan AFG CC

PTO/SB/31 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) U2054.0092
In re Application of Seiji Shimizu		
Application Number 09/167,267-Conf. #1164		Filed October 6, 1998
For WIRELESS COMMUNICATION TERMINAL AND METHOD OF CONTROLLING OPERATION, ETC.		
Art Unit 2663		Examiner K. M. George
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 340.00</p> <p> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____ </p> <p> <input type="checkbox"/> A check in the amount of the fee is enclosed. </p> <p> <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. </p> <p> <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. </p> <p> <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-2215. I have enclosed a duplicate copy of this sheet. </p> <p> <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. </p>		
<p>I am the</p> <p> <input type="checkbox"/> applicant /inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) </p> <p> <input type="checkbox"/> attorney or agent of record. Registration number _____ </p> <p> <input checked="" type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. 42,336 </p> <p style="text-align: right;">  Signature Ian R. Blum Typed or printed name </p> <p style="text-align: right;"> (212) 896-5458 Telephone number </p> <p style="text-align: right;"> November 5, 2004 Date </p>		
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p> <input type="checkbox"/> *Total of 1 forms are submitted. </p>		

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